•									Application or Docket Number					
٠,٠	PATENT A	RD	D 1064573'/											
Effective January 1, 2003 7417 9 7 0 5 0 3												3		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS			31				F	RATE FEE		1	PATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BA	BASIC FEE 375.		OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			55 minus 20=		• 35		×	X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			minus 3 =		3		7	42=		OR	X84=			
M	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT				1	+140=		ОЯ	+280=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II								441	ENTITY	.	OTHER			
_	(Column 1)			(Colui			5#A			OR I	SMALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	A	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	• 53	Minus	 5	3	•	X	\$ 9=		OR	X\$18=			
AME	Independent	• 0	Minus /		/ CI 4/14	-	X42=			OR	X84=			
-	PINOI PRESE	MIATION OF MI	JETTPLE DE	ENDENI	COUM		•	40=		OR	+280=			
								TOTAL		OR	TOTAL			
8-9.05 (Column 1) (Column 2) (Column 3)									•	5	ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING		HIGH		PRESENT			ADDI-	ı		ADDI-		
		AFTER AMENDMENT		PREVIO	DUSLY	EXTRA	R	ATE	TIONAL FEE		PATE	TIONAL		
	Total	.48	Minus	** 5	55		x	\ 6 9≈	, ree	OB	X\$18=	FEE		
	Independent	• 5	Minus	***	6	s		42=	7	OR	X84=	1		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	-		
								TOTAL		2	TOTAL	- 1		
								T. FEE		UN.	ADDIT. FEE			
_		(Column 1) CLAIMS		(Colum		(Column 3)	_			t 1				
M		REMAINING AFTER		NUM! PREVIO	DUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
AMENDMENT C	Total	AMENDMENT	Minus	PAID	POH		╽┝	9=	FEE		X\$18=	FEE		
	Independent	*	Minus	444		=				OR				
3	FIRST PRESE	NTATION OF MA	ON OF MULTIPLE DEPENDENT CLAIM				l L [×]	42⇒		OR	X84-			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									ОЯ	+280=			
-	** If the "Highest Number Proviously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL ADDIT, FEE	·		
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														
FORM PTO-675 (Rev. 12/02) U.S. Generation Mining Office: 2005—459-444/75011 Patient and Trademark Office, U.S. DEPARTMENT OF COMMERCE														

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